



ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

**AHMC Meeting Minutes**

**DATE:** September 16, 2002

**TO:** HIPAA Consortium Attendees

**FROM:** Nancy Lopac

**SUBJECT:** AZ HIPAA Medicaid Consortium (AHMC) Minutes for July 16, 2002

**Facilitator:** Tina McClung

**Attendance:** Mark Hart, Linda Hammond, Chris Smith, Anne Romer, David Wormell, Barry LuBrant, Stephanie Espinosa, Kathy Taylor-Laws, Teesa Johnson, John Valentino, Bill Leicht, Brent Ratterree, CJ Major, Gloria Reynolds, Kathy Bezon, Kathy Twitty, Ann Froio, Dallas Teat, Margo Himes, Deborah Burrell, Jack Corcoran, David Shelburg, Chuck Revenew, Kyra Westlake, Bruce Jameson, Marsha Solomon, Shirley Henson, John Johnston, Gary Heller, Brian Bender, Michael Wells, Sharon Zamora, Dan Lippert, Todd Schuett, Mary Beth Joubanc, Tracy K. Langdon, Huong Vo, Nancy Lopac

**Welcome and Introduction**

Tina welcomed everyone.

**Agenda**

- General Housekeeping Items
- Meeting Purpose and Scope
- Status of AHCCCS HIPAA Activities
- AHCCCS Privacy & Security Project

**General Housekeeping Items**

- Sign-in sheets and consortium membership lists are being distributed.
  - Please verify your information and the information of others in your organization, as it appears the current information is not complete.
- Please review the minutes from the last meeting.
  - If you have any changes or corrections, please e-mail them to Nancy Lopac.

**Meeting Purpose and Scope**

- Provide information and status on AHCCCS HIPAA activities.
- Get input from MCOs regarding HIPAA concerns.
- Provide tentative timelines where possible.
- Discuss AHCCCS HIPAA Privacy & Security.



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#### **AHCCCS Activities and Status**

##### Web Site:

- AHCCCS HIPAA Web Site prototype design has been completed and includes:
  - HIPAA News
    - State and National
  - Meeting Schedules
  - Frequently Asked Questions (FAQs)
  - Implementation and Remediation Information
  - Testing Information
  - HIPAA Links
  - Documents and Materials - may include a disclaimer:
    - Some downloads of mapping documents take 6-8 minutes.
    - Will have to be careful what is put here.
- Expect to promote Web Site into production environment within a couple of weeks.

##### Implementation Date Delay:

- AHCCCS will file for the delay.
  - The program contractors and providers will each file on own.
  - AHCCCS is looking at feasibility of filing one application for delay at the state level.

##### HIPAAZ:

- Emphasis is on coordinating activities among the state agencies and other entities impacted by HIPAA.
- Angela Fischer, AHCCCS State Entity HIPAA Coordinator, is introduced.
  - Facilitate communication.
  - Handle issues and concerns uniformly.
  - Provide high-level HIPAA awareness to affected state agencies.
  - Evaluate best method to file extension.

##### HIPAA Assessment Project:

- Currently incorporating addenda changes into mapping effort.
  - These changes were made because the way original IG information was presented would have made it impossible for some entities to implement correctly.
    - Some changes are very minor – 270/271.
    - More extensive changes on the 278 and 837.



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- 834 Enrollment Rosters:
  - Codes and values have been mapped.
  - Continue with assessment efforts.
  - Workgroups to concentrate on resolving remaining or new issues.
    - Pima and Mercy Care have issues regarding the use of loops and segments with recipients:
      - Where you can repeat the loop or create a new segment for example for a recipient on a daily roster.
      - Will need to determine design.
  - We will develop the content for the companion guides, remediation steps, and the addenda changes.
  - Materials for methods and approach that were prepared and passed out prior to workgroup meetings should be reviewed and completed before the meetings.
  - During the workgroup meetings we will be doing a walkthrough of the completed materials.
- 820 Capitation Rosters:
  - We will be concentrating on the same things as with enrollment.
- 837 and NCPDP Encounters:
  - Professional
    - We received comments from PHS and Mercy Care.
    - We estimate to send mappings out to partners and plans about the end of July.
      - Clean up some things before they go out.
      - More effort up front, less will have to be done in the workgroups.
- 278 Prior Authorizations:
  - This doesn't concern the plans.
- Local Codes and Values:
  - We have approximately 160 codes to map.
  - We expect that long term care and transportation will be looked at and either mapped or have petitioned codes by November – per Tina and Brent.
  - By January '03 we should have the codes that we've petitioned for.
    - Placeholders are meaningless – per Brent.
  - We are expecting a high volume of local codes – per Brent.
  - The end of local codes is by date of service.
  - Once HIPAA is implemented, any dates of service prior to the implementation can use the local codes.
  - Dates of service on or after the implementation must use the new national codes to which they have been mapped.
  - Depending upon how codes map, that will be our remediation impact.



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#### Encounter Workgroup:

- We held our first meeting 7/9/02.
- We distributed the mapping of the codes and values and the encounter issues list.
- Identified a major issue from the plans:
  - Paper claim may not include all the data required to translate into an 837 HIPAA transaction.
  - For at least one plan, the current contract with a vendor will not allow translation into the 837 format even if all of the data is present.
  - Tina requests all plans and program contractors to e-mail by 7/23/02:
    - List of the required data that does not come in on paper claims.
    - The volume of claims currently received on paper. If providing percent, send the base figure.
- AHCCCS mandated encounter business - not yet HIPAA required, but CMS appears to be going in that direction.

#### Remediation Strategy:

- Combination of PMMIS remediation and translation.
- Expect to complete all assessment activities by 10/31/02.
- Outline for the companion guides has been developed.
  - Section for the technical environment.
  - Testing criteria specifications.
- Expect to complete all remediation and translation by 9/30/03.
- Emphasize priority of 834 and 820.
  - Expect to start testing by late '02 or early '03.
- AHCCCS official position is that our testing priority is with our trading partners.
- We will also test with vendors, clearinghouses, etc. if we have the resources and time to do so.

#### Privacy and Security – lead by Matt Devlin:

- We have a contract with FourThought Group for the HIPAA Project and Security Project.
- Three phased approach – pre-assessment, assessment, and implementation.
- The requirement to obtain written consent prior to provision of service is the subject of the modifications to the rules that are currently pending.
  - The existing rule, providers are obligated to obtain consent prior to the provision of service in order to use or disclose information for purposes of treatment, payment, and health plan operations.
  - Proposed rule if finalized will change to say have to obtain consent reasonably quickly after providing services at least provide notice and that there is more than implied consent.
  - Authorization is the documentation required to obtain user disclosed information for purposes other than treatment, payment, or health plan operations.
- AHCCCS finalized contract with 4TG
  - 4TG will conduct assessment of administration's operations with respect to privacy requirements.
    - Three phase process



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- Currently in pre-assessment phase which means 4TG is putting together materials for preliminary education, designing tools to define requirements and current practices to:
  - Define gaps
  - Determine risks
- AHCCCS will receive detailed assessment from 4TG.
- AHCCCS will look at risks and prioritize from two perspectives.
  - AHCCCS objective is to achieve C+ compliance by April '03.
  - 4TG will identify what is necessary to achieve A+ compliance as well for improvements to be made after April '03.
- 4TG will be the primary lead in the pre-assessment and assessment phases.
- AHCCCS staff will have primary responsibility for the implementation phase which will begin about the first of '03.
- AHCCCS may post document templates on web site.
  - Privacy notice – health plans to draft own forms to accurately describe their practices.
    - Not in the rule for the Medicaid agency to approve MCOs' privacy notices.
  - If state requirements are stricter than the federal requirements, must use the stricter format.

#### Wrap Up:

- Currently we have two workgroups addressing privacy and security issues. One is internal and one is with the MCOs. A third possibility would be with other state agencies.
- The next consortium meeting will be held in September and will have a reduced format down to two hours.